

DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATIONS

Original Supplemental Substitute PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Transparent Polymer Articles of Low Thickness

which is described and claimed in:

the attached specification.

the specification in U.S. Application No. _____, filed _____, and as amended on _____ (day/month/year) _____ (day/month/year) (if applicable).

the specification in International Application No. _____, filed _____ (day/month/year) assigned U.S. Application No. _____ (if applicable), and as amended under PCT Article 19 on _____ (day/month/year) (if applicable)

under PCT Article 34 on _____ (day/month/year) (if applicable)

and further amended on _____ (day/month/year) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is known by me to be material to the patentability of this application as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America relating to this subject matter having a filing date before that of the application on which priority is claimed:

COUNTRY/REGION (OR PCT)	APPLICATION No.	FILING DATE (day/month/year)	PRIORITY CLAIMED	
Europe (designating DE)	00810666.8	26/07/00	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. § 119 (e) of any United States provisional application(s) listed below:

APPLICATION NO.	FILING DATE (day/month/year)
-----------------	---------------------------------

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or PCT international application(s) designating the United States listed below and, insofar as the application discloses and claims subject matter in addition to that disclosed in the prior copending application, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. APPLICATION No.	FILING DATE (day/month/year)	STATUS
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned
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PCT APPLICATION No. (designating the U.S.)	INTERNATIONAL FILING DATE (day/month/year)	U.S. APPLICATION No. (if any)	STATUS
			<input type="checkbox"/> Patented
			<input type="checkbox"/> Pending
			<input type="checkbox"/> Abandoned

I hereby appoint the following attorneys and agents, associated with Customer No. 000324, each of them with full power of substitution, revocation and appointment of associates, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Luther A. R. Hall (Reg. No. 27,337), JoAnn L. Villamizar (Reg. No. 30,598), Kevin T. Mansfield (Reg. No. 31,635), David R. Crichton (Reg. No. 37,300), Michele A. Kovaleski (Reg. No. 37,865) and Tyler A. Stevenson (Reg. No. 46,388).

Address all correspondence associated with Customer No. 000324 to ***Ciba Specialty Chemicals Corporation, Patent Department, 540 White Plains Road, P.O. Box 2005, Tarrytown, NY 10591-9005.***

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole
or first joint inventor **David George LEPPARD**

Inventor's signature David George Leppard Date 06.06.2001
(day/month/year)

Residence **Route de Bourguillon 6A
1723 Marly
Switzerland**

Citizenship **Swiss**

Post Office Address **same as above**

Full name of second
joint inventor, if any **François GUGUMUS**

Inventor's signature François Gugumus Date 12.06.2001
(day/month/year)

Residence **Ochsengasse 20
4123 Allschwil
Switzerland**

Citizenship **French**

Post Office Address same as above

Full name of third
joint inventor, if any **Michela BONORA**

Inventor's signature Date
(day/month/year)

Residence **Via Volontari della Libertà 9
40135 Bologna
Italy**

Citizenship **Italian**

Post Office Address same as above

Full name of fourth
joint inventor, if any

Inventor's signature Date
(day/month/year)

Residence

Citizenship

Post Office Address same as above

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Full name of sole
or first joint inventor **David George LEPPARD**

Inventor's signature _____ Date _____
(day/month/year)

Residence **Route de Bourguillon 6A
1723 Marly
Switzerland**

Citizenship **Swiss**

Post Office Address **same as above**

Full name of second joint inventor, if any **François GUGUMUS**

Inventor's signature _____ Date _____
(day/month/year)

Residence **Ochsengasse 20
4123 Aeschwil
Switzerland**

Citizenship **French**

Post Office Address **same as above**

Full name of third joint inventor, if any **Michela BONORA**

Inventor's signature Michela Bonora Date 21/06/01
(day/month/year)

Residence **Via Volontari della Libertà 9
40135 Bologna
Italy**

Citizenship **Italian**

Post Office Address **same as above**

Full name of fourth joint inventor, if any

Inventor's signature _____ Date _____
(day/month/year)

Residence

Citizenship

Post Office Address **same as above**